

**FENWICK & WEST LLP**

SAN FRANCISCO OFFICE | EMBARCADERO CENTER WEST

275 BATTERY ST., SUITE 1500 | SAN FRANCISCO, CA 94111

TEL 415.875.2300 | FAX 415.281.1350 | WWW.FENWICK.COM

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SEP 20 2004

FACSIMILE TRANSMISSION**CONFIDENTIAL**

DATE: September 20, 2004

CLIENT-MATTER No.: 23546-07665/US

Client ref. No. RTS-0274

To:

| NAME | FAX No. | PHONE No. |
|-------|----------------|-----------|
| USPTO | (703) 872-9306 | |

FROM: Michael J. Shuster
Reg. No. 41,310**PHONE:** (415) 875-2413**SENT BY:** Tracie Brooks**PHONE:** (415) 875-2482

NUMBER OF PAGES WITH COVER PAGE: 11

ORIGINAL WILL NOT FOLLOW

MESSAGE:Application No.: 10/006,191
Filing Date: December 10, 2001*Please See The Attached
Amendment/Response***CAUTION - CONFIDENTIAL**

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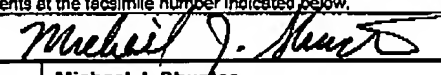
A1000/00103/SF/5121030.5

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| | | | | | |
|--|--|--|------------------------|-----------------------|-----------------------|
| 0001/PTO Rev. 10/95 | | U.S. Department of Commerce Patent and Trademark Office | | Application Number | 10/006,191 |
| TRANSMITTAL FORM (to be used for all correspondence during pendency of filed application) | | | | Filing Date | December 10, 2001 |
| | | | | First Named Inventor | William Gaarde |
| | | | | Group Art Unit Number | 1635 |
| | | | | Examiner Name | Sean McGarry |
| Total Number of Pages in This Submission | | 10 | Attorney Docket Number | | 23546-07665 (RTS-274) |

| ENCLOSURES (check all that apply) | |
|---|---|
| <input checked="" type="checkbox"/> Fee Transmittal Form (in duplicate) <input type="checkbox"/> Check Enclosed <input type="checkbox"/> Return Receipt Postcard <input type="checkbox"/> Response to Notice to File Missing Parts <input type="checkbox"/> Assignment & Recordation Cover Sheet <input type="checkbox"/> Declaration <input type="checkbox"/> Power of Attorney <input type="checkbox"/> Application Data Sheet <input type="checkbox"/> Information Disclosure Statement & PTO/SB/08A <input type="checkbox"/> Copies of IDS Cited References <input type="checkbox"/> Request for Corrected Filing Receipt <input type="checkbox"/> Request for Correction of Recorded Assignment <input checked="" type="checkbox"/> Response/Amendment: [7] Page(s) <input type="checkbox"/> After Final <input type="checkbox"/> Status Request <input type="checkbox"/> Revocation and Substitute Power of Attorney | <input type="checkbox"/> Issue Fee Transmittal <input type="checkbox"/> Letter to Chief Draftsperson <input type="checkbox"/> Formal Drawing(s): [] Sheet(s) of Figure(s) [] <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> After Allowance Communication to Group <input checked="" type="checkbox"/> Fax Cover Page <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| REMARKS: | |

| SIGNATURE OF ATTORNEY OR AGENT | | | |
|--------------------------------|---|--------|--------------------|
| Signature: |  | | |
| Attorney/Reg. No.: | Michael J. Shuster, Reg. No. 41,310 | Dated: | September 20, 2004 |

| CERTIFICATE OF FACSIMILE TRANSMISSION | | | |
|--|---|--------|--------------------|
| I hereby certify that this correspondence, including the enclosures identified above, is being transmitted on the date shown below via facsimile to: Commissioner for Patents at the facsimile number indicated below. | | | |
| Signature: |  | | |
| Typed or Printed Name: | Michael J. Shuster | Dated: | September 20, 2004 |
| Facsimile Number: | 1-703-872-9306 | | |

23546/07665/SF/5116291.1

FEE TRANSMITTAL for FY 2004

Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$110.00)

Complete if Known

| | |
|----------------------|--------------------------|
| Application Number | 10/006,191 |
| Filing Date | December 10, 2001 |
| First Named Inventor | Gaarde, et al. |
| Examiner Name | McGarry |
| Art Unit | 1635 |
| Attorney Docket No. | 23546-07665/US (RTS-274) |

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ Other ☐ None
☒ Deposit Account:

Deposit Account Number 19-2555

Deposit Account Name Fenwick & West LLP

The Commissioner is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☒ Credit any overpayments
☒ Charge all required fee(s) or any underpayment of fee(s) due under 37 CFR §1.16 or §1.17 during the pendency of this application
☐ Charge fee(s) indicated below, except for the filing fee

to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

| Large Entity | | Small Entity | | Fee Description | Fee Paid |
|--------------|----------|--------------|----------|------------------------|----------|
| Fee Code | Fee (\$) | Fee Code | Fee (\$) | | |
| 1001 | 770 | 2001 | 385 | Utility filing fee | |
| 1002 | 340 | 2002 | 170 | Design filing fee | |
| 1003 | 530 | 2003 | 265 | Plant filing fee | |
| 1004 | 770 | 2004 | 385 | Reissue filing fee | |
| 1005 | 180 | 2005 | 80 | Provisional filing fee | |
| SUBTOTAL (1) | | | | (\$) | |

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

| Total Claims | Extra Claims | Fee from below | Fee Paid |
|--------------------|--------------|----------------|----------|
| Independent Claims | 20** | X | |
| Multiple Dependent | 3** | X | |

| Large Entity | | Small Entity | | Fee Description |
|--------------|----------|--------------|----------|---|
| Fee Code | Fee (\$) | Fee Code | Fee (\$) | |
| 1202 | 18 | 2202 | 9 | Claims in excess of 20 |
| 1201 | 85 | 2201 | 43 | Independent claims in excess of 3 |
| 1203 | 290 | 2203 | 145 | Multiple dependent claim, if not paid |
| 1204 | 86 | 2204 | 43 | **Reissue independent claims over original patent |
| 1205 | 18 | 2205 | 9 | **Reissue claims in excess of 20 and over original patent |
| SUBTOTAL (2) | | | | (\$) |

*or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

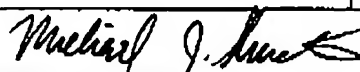
| Large Entity | | Small Entity | | Fee Description | Fee Paid |
|--------------|----------|--------------|----------|--|----------|
| Fee Code | Fee (\$) | Fee Code | Fee (\$) | | |
| 1051 | 130 | 2051 | 65 | Surcharge - late filing fee or oath | |
| 1052 | 50 | 2052 | 25 | Surcharge - late provisional filing fee or cover sheet | |
| 1053 | 130 | 1053 | 130 | Non-English specification | |
| 1812 | 2,520 | 1812 | 2,520 | For filing a request for <i>ex parte</i> reexamination | |
| 1804 | 920* | 1804 | 920* | Requesting publication of SIR prior to Examiner action | |
| 1805 | 1,840* | 1805 | 1,840* | Requesting publication of SIR after Examiner action | |
| 1251 | 110 | 2251 | 55 | Extension for reply within first month | 110.00 |
| 1252 | 420 | 2252 | 210 | Extension for reply within second month | |
| 1253 | 950 | 2253 | 475 | Extension for reply within third month | |
| 1254 | 1,480 | 2254 | 740 | Extension for reply within fourth month | |
| 1255 | 2,010 | 2255 | 1,005 | Extension for reply within fifth month | |
| 1401 | 330 | 2401 | 165 | Notice of Appeal | |
| 1402 | 330 | 2402 | 165 | Filing a brief in support of an appeal | |
| 1403 | 290 | 2403 | 145 | Request for oral hearing | |
| 1451 | 1,510 | 1451 | 1,510 | Petition to institute a public use proceeding | |
| 1452 | 110 | 2452 | 55 | Petition to revive - unavoidable | |
| 1453 | 1,330 | 2453 | 665 | Petition to revive - unintentional | |
| 1501 | 1,330 | 2501 | 665 | Utility issue fee (or reissue) | |
| 1502 | 480 | 2502 | 240 | Design issue fee | |
| 1503 | 640 | 2503 | 320 | Plant issue fee | |
| 1460 | 130 | 1460 | 130 | Petitions to the Commissioner | |
| 1807 | 50 | 1807 | 50 | Processing fee under 37 CFR 1.17(g) | |
| 1808 | 180 | 1808 | 180 | Submission of Information Disclosure Stmt | |
| 8021 | 40 | 8021 | 40 | Recording each patent assignment per property (times number of properties) | |
| 1809 | 770 | 2809 | 385 | Filing a submission after final rejection (37 CFR 1.129(a)) | |
| 1810 | 770 | 2810 | 385 | For each additional invention to be examined (37 CFR 1.129(b)) | |
| 1801 | 770 | 2801 | 385 | Request for Continued Examination (RCE) | |
| 1802 | 900 | 1802 | 900 | Request for expedited examination of a design application | |

Other fee (specify) _____

SUBTOTAL (3) (\$110.00)

*Reduced by Basic Filing Fee Paid

SUBMITTED BY

| | | | | | |
|-------------------|---|-----------------------------------|--------|--------------------------|--------------------------|
| Name (Print/Type) | Michael J. Shuster | Registration No. (Attorney/Agent) | 41,310 | Complete (if applicable) | Telephone (415) 875-2413 |
| Signature |  | | | Date | September 20, 2004 |

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SUBTOTAL (1)

(\$)

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|--------------------|--------------|----------------|----------|
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| Independent Claims | 3 | | |
| Multiple Dependent | | | |

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SUBTOTAL (2)

(\$)

*or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

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| 1802 | 900 | 1802 | 900 | Request for expedited examination of a design application | |

Other fee (specify)

SUBTOTAL (3) (\$)**110.00**

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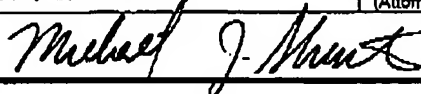
SUBMITTED BY

Name (Print/Type) **Michael J. Shuster**Registration No. **41,310**
(Attorney/Agent)

Complete (if applicable)

Telephone **(415) 875-2413**

Signature



Date

September 20, 2004